FORM D

BEC Mail Mail Processing Section UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

APR 2 1 2008

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

Washington, DC

UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires:
Estimated average burden
hours per response.....16.00



Name of Offering (check it this is an amendment and name has changed, and indicate change.)	00040040
O'Connor North American Property Partners II, L.P. Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)) ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	DE0-
1. Enter the information requested about the issuer	BEST AVAILABLE CO
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
O'Connor North American Property Partners II, L.P.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
535 Madison Avenue, 23rd Floor, New York, NY 10022	(212) 308-7700
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
O'Connor North American Property Partners II, L.P. is being organized to acquire North Am	erican real estate related assets.
business trust limited partnership, to be formed	PROCESSED APR 2 8 2008 THOMSON REUTERS
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given by which it is due, on the date it was mailed by United States registered or certified mail to that address.	5. A notice is deemed filed with the U.S. Securities below or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	0549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manual photocopies of the manually signed copy or bear typed or printed signatures.	ly signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously support be filed with the SEC.	ort the name of the issues and offering, any changes died in Parts A and B. Part E and the Appendix need
Filing Fee: There is no federal fiting fee.	
State:	
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the	sales of securities in those states that have adopted Securities Administrator in each state where sales

– ATTENTION –

are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

this notice and must be completed.

		A. BASIC IDE	NTIFICATION DATA		
2. Enter the information re	quested for the fol	lowing:			·
Each promoter of to	he issuer, if the iss	uer has been organized w	thin the past five years;		
 Each beneficial own 	ner having the pow	er to vote or dispose, or dir	ect the vote or disposition	of, 10% or more o	fa class of equity securities of the issuer.
Each executive offi	icer and director o	f corporate issuers and of	corporate general and man	naging partners of	partnership issuers; and
 Each general and m 	nanaging partner o	l partnership issuers.			
Check Box(es) that Apply:	✓ Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i J.W. O'Connor & Co. Inco		eral Partner of O'Conno	or Associates L.P.)		
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co			
535 Madison Avenue, 23	rd Floor, New Y	ork, NY 10022			
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i					
O'Connor Associates L.P.	. (Sole Member	of O'Connor North Arr	erican Holdings, LLC)		
Business or Residence Addre. 535 Madison Avenue, 23rd			de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i O'Connor North America		(Sole Member of O'Co	onnor North American	Management P	artners II, LLC)
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	de)		
535 Madison Avenue, 23r	d Floor, New Yo	ork, NY 10022			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
O'Connor North American	Management F	Partners II, LLC (Gener	al Partner of the Issue	r)	
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	đe)		
535 Madison Avenue, 23	rd Floor, New Y	ork, NY 10022			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i O'Connor, Jeremiah W.,					
Business or Residence Addre			đe)	-	
535 Madison, Avenue, 23	ard Floor, New Y	ork, NY 10022			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it O'Connor, William Q.	f individual)			<u> </u>	
Business or Residence Addre 535 Madison Avenue, 2			de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	/ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)		· · · · · · · · · · · · · · · · · · ·		
Quinn, Thomas E.					
Business or Residence Addre 535 Madison Avenue, 23			de)		

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Phelan, John F. Business or Residence Address (Number and Street, City, State, Zip Code) 535 Madison Avenue, 23rd Floor, New York, NY 10022 Promoter Beneficial Owner D Executive Officer General and/or Director Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Rotolo, Natina Business or Residence Address (Number and Street, City, State, Zip Code) 535 Madison Avenue, 23rd Floor, New York, NY 10022 General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) MacKenzie, Suzanne Business or Residence Address (Number and Street, City, State, Zip Code) 535 Madison Avenue, 23rd Floor, New York, NY 10022 Promoter Beneficial Owner DE Executive Officer Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Brian L.P. Fallon Business or Residence Address (Number and Street, City, State, Zip Code) 535 Madison Avenue, 23rd Floor, New York, NY 10022 Beneticial Owner Executive Officer General and/or Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Marty Caverly Business or Residence Address (Number and Street, City, State, Zip Code) 535 Madison Avenue, 23rd Floor, New York, NY 10022 General and/or Promoter Beneficial Owner Disecutive Officer Director Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Ander Legorreta Business or Residence Address (Number and Street, City, State, Zip Code) 535 Madison Avenue, 23rd Floor, New York, NY 10022 General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

Γ	<u>_</u>	<u></u>	-		B. 12	NFORMATI	ION ABOU	T OFFER	NG	-			
									this offici	in a f		Yes	No
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								L				
2.	What is the minimum investment that will be accepted from any individual?									00,000,00			
	Does the offering permit joint ownership of a single unit?									Yes	No		
3.													
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Il Name (Last name first, if individual)												
Ful	II Name (I	Last name	11 15 1, 11 ING1	(viouat)									
Bu	siness or	Residence	Address (N	umber and	Street, Ci	ity, State, Z	ip Code)				-		
Na	me of Ass	sociated Br	oker or De	aler						"	<u></u>		
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers						
	(Check	"All States	or check	individual	States)	*************	***********			• · • • • • • • • • • • • • • • • • • •		☐ A1	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AK KS NH TN	CA KY NI TX	CO LA NM UT	ME ME NY	DE MD NC VA	DC MA ND WA	MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	ll Name (Last name	first, if indi	ividual)									
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State, 2	Zip Code)		·			· · · · · · · · · · · · · · · · · · ·	
Na	me of As:	sociated Br	roker or De	aler		<u> </u>							
Sta			Listed Ha								<u> </u>		
	(Check	"All State:	s" or check	individual	States)			,		****		☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA (IN) WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Fu	ll Name (Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (I	Number an	d Street, C	City, State,	Zip Code)						
Na	me of Ass	sociated Br	roker or De	aler		<u> </u>		·					
Sta	ites in Wh	ich Person	Listed Has	s Solicited	or intends	to Solicit	l'urchasers						
	(Check	"All States	s" or check	individual	States)				***************************************	***************************************		□ A1	l States
	AL L MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

<u>Addendum</u>

The General Partner intends to require a minimum capital commitment of \$5,000,000 from each Limited Partner, which minimum may be waived by the General Partner at its discretion.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		A A broade
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	§ 0.00	s 0.00
	Equity	s 0.00	s 0.00
	Common Preferred		0.00
	Convertible Securities (including warrants)	\$_0.00	SS_407,142,857.15
	Partnership Interests	S_1,000,000,000.00	~
	Other (Specify)	\$_0.00	\$_0.00
	Total	\$	S_407,142,857.15
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Accredited Investors	Number Investors	Aggregate Dollar Amount of Purchases § 407,142,857.15
			5 0.00
	Non-accredited Investors		s 407,142,857.15
	Total (for filings under Rule 504 only)		\$ 401,142,007
	Answer also in Appendix, Column 4, it filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	*	\$
	Regulation A		\$
	Rulc 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		§ 52,000.00
	Legal Fees		S 500,000.00
	Accounting Fees		ş_0.00
	Engineering Fees		s_0.00
	Sales Commissions (specify finders' fees separately)		S_0.00
	Other Expenses (identify) Travel, Shipping		s 48,000.00
	Total	_	\$ 600,000.00
		ت	

b. Enter the difference between the aggregate offering price given in response to Part C — Question and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted groproceeds to the issuer."	SS	\$_999,400,000.00
Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used f each of the purposes shown. If the amount for any purpose is not known, furnish an estimate at check the box to the left of the estimate. The total of the payments listed must equal the adjusted gro proceeds to the issuer set forth in response to Part C — Question 4.b above.	br	
	Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees	📝 S 0.00	_ \$ _0.00
Purchase of real estate	🗹 \$ <u>0.00</u>	\$ 0.00
Purchase, rental or leasing and installation of machinery and equipment	🗸 \$ <u>0.00</u>	Z 2 0.00
Construction or leasing of plant buildings and facilities	🔽 \$ <u>0.00</u>	⋥ \$ <u>0.00</u>
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	🗹 \$ <u>0.00</u>	✓ \$ 0.00
Repayment of indebtedness		₽ \$_0.00
Working capital	🗹 \$ <u>0.00</u>	Z \$_0.00
Other (specify): Capital will be drawn down by the Issuer and possibly certain parallel	\$ 0.00	\$ 0.00
partnerships as needed to fund investments, to pay down indebtedness outstanding from time to time and to cover costs of operations that cannot be funded with revenue from operations.		999,400,000.0
Column Totals	🔽 \$_0.00	\$ 999,400,000.0
Total Payments Listed (column totals added)	_	99,400,000.00
D. FEDERAL SIGNATURE		

Issuer (Print or Type)	Signature	Date
O'Connor North American Property Partners II, L.P.	Vatina Rotolo	
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Natina Rotolo	Vice President, Treasurer and Secretary	

- ATTENTION ---

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
I.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ×

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature Date
O'Connor North American Property Partners II, L.P.	Matura Rotolo Apr: 116, 2008
Name (Print or Type)	Title (Print or Type)
Natina Rotolo	Vice President, Treasurer and Secretary

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AP	PENDIX			_ ,,,	
1	Intend to non-a investors	2 I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rchased in State C-Item 2)		under Sta (if yes, explana	ification ate ULOE attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									<u></u>
AR									
CA									
со									
ст				-					
DE									
DC									
FL			100						
GA									
ні									
ID							 -	LJ	<u> </u>
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IN									
IA									
KS									1
KY									
LA									
ME							—		
MD									
MA									
MI									
MN									
MS									

				APP	ENDIX				
1	Intend to non-a investor	to sell coredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
МТ			-						
NE			-						<u> </u>
NV									
NH									1
lи									
NM									
NY									
NC									
ND									
ОН									
ок									
OR									
PA									
Ri									
SC									
SD									
TN									
тх									
UT									
VT									
VA									
WA									[
wv									
WI									

				APP	ENDIX					
ı		2	3		4					
	to non-a	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	Finvestor and orchased in State C-Item 2)		under State ULC (if yes, attach explanation of waiver granted (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR										